

NOTICE OF CHANGE OF EMPLOYER

Information regarding support payments and/or other information **cannot** be released by phone without a Case Number. This can be found on your check stub or Court papers. This policy is for your protection as well as ours.

Support payments made through this office are mailed the same day we receive them.

If you have been ordered to notify the McLean County Circuit Clerk's Office of a change in employer, you may use this form to do so. We will **NOT** accept changes over the phone; all changes **MUST** be made in writing.

The Clerk's Office **WILL NOT** automatically send the new employer notice. It is **YOUR RESPONSIBILITY** to ensure that your current employer is notified of any child support obligation you may have that needs to be garnished from your wages.

PLEASE PRINT

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CASE No: _____

NAME: _____

NAME OF NEW EMPLOYER: _____

ADDRESS OF NEW EMPLOYER: _____

NAME OF PAYOR: _____

(Person obligated to pay support)

NAME OF INDIVIDUAL MAKING THIS REQUEST: _____

Please PRINT this form, complete and mail to:

McLean County Circuit Clerk
Child Support Division
PO Box 2420
Bloomington, IL 61702-2420